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MEDICAID MEMO

TO: All Providers participating in the Virginia Medical Assistance Program providing services in Winchester, Virginia and the surrounding counties

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services (DMAS)

MEMO Special
DATE 11/30/2005

SUBJECT: Managed Care Organization (MCO) Program Expands Into the Winchester Region – Effective December 1, 2005

The purpose of this memorandum is to inform you of the entry of Medicaid- and FAMIS-contracted Managed Care Organizations (MCOs) into the Winchester region. DMAS is pleased to announce that Anthem HealthKeepers Plus, Optima Family Care, and Virginia Premier Health Plan will be entering the Winchester region on December 1, 2005. Managed care-eligible enrollees will now have a choice between three health plans offering a wide range of enhanced services currently not available under the MEDALLION PCCM (Primary Care Case Management) program. Medicaid and FAMIS managed care-eligible enrollees in the following localities will be affected:

Clarke
Rappahannock
Winchester

Frederick
Shenandoah

Page
Warren

Medicaid's MCO program began on January 1, 1996, as a managed care initiative for the Virginia Medical Assistance Program. The current managed care program covers Medicaid and FAMIS populations in 103 localities in the Commonwealth of Virginia and has undergone expansions in 1997, 1999, 2000, 2001, and September 2005. Expansion of the managed care program has resulted in significant health outcome achievements that are detailed in the *Virginia Managed Care Performance Report 2003-2004*, which is available at [www.dmas.virginia.gov/downloads/pdfs/mc-2004 annual report.pdf](http://www.dmas.virginia.gov/downloads/pdfs/mc-2004%20annual%20report.pdf).

IMPACT OF MCO EXPANSION ON PROVIDERS

Medicaid/Medallion II

The introduction of MCOs to the Winchester region means the end of the MEDALLION PCCM program in the localities listed above. The MEDALLION program ended in the Winchester region on September 30, 2005, and is no longer an option for recipients in those localities. All Medicaid managed care-eligible individuals in the affected localities, who were formerly enrolled in MEDALLION, have been returned to fee-for-service (regular) Medicaid until December 1, 2005. At that time, they will be enrolled in either Anthem HealthKeepers Plus, Optima Family Care, or Virginia Premier Health Plan.

Each MCO is responsible for the development of its own provider network. Providers are encouraged to contract with one or all of the MCOs to continue serving the Medicaid managed care population. Providers who were serving enrollees under the MEDALLION program must contract with one or all of the MCOs in order to continue providing services to Medicaid managed care recipients.

If you have not already been contacted by one of the MCOs, DMAS encourages providers to contact the MCOs to begin the contracting and credentialing process. Please be aware that credentialing may take up to 90 days. If you wish to contract with one or all of the MCOs, please contact them at the following phone numbers:

Anthem HealthKeepers Plus	1-804-354-7060
Optima Family Care	1-877-865-9075
Virginia Premier Health Plan	1-804-819-5160

To assist in the transition process, DMAS will be providing the MCOs with Medical Transition Reports. These reports will reflect individuals receiving certain medical services, such as durable medical equipment (DME), pregnancy services, and dialysis among others. This information will assure that services with current DMAS authorizations, etc., are transferred to the MCOs without disruption.

Providers will be able to identify recipients enrolled in an MCO by their member ID card. Recipients may call the MCO to request replacement cards if needed. If a Medicaid recipient seeks services, providers should always ask for their MCO member ID card **and** plastic Medicaid card. These cards will help providers verify eligibility. In the Winchester area, individuals enrolled in MCOs will carry a card bearing the name of Anthem HealthKeepers Plus, Optima Family Care, or Virginia Premier Health Plan. All MCO ID cards include the recipient's Virginia Medicaid ID number. Providers should always verify enrollee eligibility before providing services.

DMAS appreciates providers' continued support of these programs. If providers have questions about this memo, please contact Kathleen Dickerson at 1-804-371-8852. Providers who have questions about managed care may also contact the Managed Care Unit at 1-804-692-0270.

FAMIS

Previously, FAMIS enrollees received services in the Winchester region through FAMIS fee-for-service. FAMIS enrollees have had benefits similar to the Medicaid benefits package. On December 1, 2005, however, FAMIS children will be enrolled in one of the three available MCOs: Anthem HealthKeepers Plus, Optima Family Care, or Virginia Premier Health Plan. Enrollees will receive their services through the selected MCO and will get benefits, which are slightly different than those they have received previously through fee-for-service. While FAMIS will continue to cover doctor visits, hospitalization, emergency services, mental health, dental care, vaccinations and well-child visits, transportation and EPSDT services are not available. Many of the services under EPSDT are available through the managed care FAMIS well-child benefit. The MCOs also provide additional services to FAMIS enrollees, such as enrollee education and outreach services, disease management programs, and case management services.

For most services, FAMIS enrollees will now have to pay a small co-payment. Most co-payments are just \$2.00 or \$5.00. Some services like regular check-ups and well-baby/well-child visits, however, have no co-payments. Providers will need to collect these co-payments before providing services. FAMIS enrollees will continue to carry and present the blue and white permanent Medicaid card at each visit. They will also have a MCO identification card. The MCO identification card will provide co-payment and other coverage information, including how to contact their MCO for other coverage details and requirements.

In order for a provider to receive payment for services rendered to a FAMIS child, the provider must participate with the MCO identified on the enrollee's ID card. To contract with a MCO in the area, please contact the specific MCO at one of the phone numbers noted above. Questions about FAMIS should be directed to the FAMIS Central Processing Unit (CPU) at 1-866-87FAMIS (873-2647). The FAMIS CPU, in addition to determining eligibility, will also assist with questions about co-payments, MCO provider information, how to contact the MCO, and choosing a MCO.

IMPACT OF MCO EXPANSION ON ENROLLEES

Medicaid/Medallion II

There are certain groups of Medicaid recipients who are exempt from MCO participation. These individuals will continue to be served through Medicaid's fee-for-service program. These individuals include, but are not limited to, recipients in nursing facilities, recipients in intermediate care facilities for the mentally retarded (ICF-MRs), recipients enrolled in Home- and Community-Based Waiver programs, and recipients who have other comprehensive group or individual health insurance, including Medicare. Providers should continue treatment of these individuals without interruption.

On December 1, 2005, all managed care-eligible enrollees in the Winchester region will be enrolled in Anthem HealthKeepers Plus, Optima Family Care, or Virginia Premier Health Plan.

Letters for recipients impacted by the expansion (former MEDALLION and current fee-for-service enrollees who are not exempt) were mailed in late October. These letters provided the recipient with a choice of the three health plans. If the recipient does not make an affirmative choice, he/she will be assigned to the contracted MCO listed in the letter. Recipients will be instructed to contact the Managed Care HELPLINE with questions related to their MCO assignment or to make changes in their assignment during the enrollment period. The Managed Care HELPLINE assists recipients in selecting a plan, addressing and documenting members' concerns, and completing health status assessment surveys that are forwarded to the assigned/chosen MCO. Recipients may contact the Managed Care HELPLINE at 1-800-643-2273 or find more information on Managed Care on the DMAS website at www.dmas.virginia.gov/mc-home.htm.

FAMIS

In September, Medicaid and FAMIS enrollees in the Winchester area were notified that their options for receiving health care were changing, and they would be able to pick a health plan. Enrollment in a MCO is mandatory for all FAMIS enrollees and for most Medicaid recipients unless they meet certain exemption criteria. When a recipient is enrolled in the MCO, the MCO will send a member packet that includes a MCO identification card, summary of coverage, MCO benefits, and how to contact the MCO for assistance. The enrollee should always present both the MCO and Medicaid cards when seeking care. The MCO can help with locating a provider, understanding covered services and how to access them, providing resources to disease and case management, and providing valuable enrollee education.

Newly assigned managed care enrollees will be able to select a different MCO if they choose to do so during the first ninety (90) days after initial enrollment. To make a change, Medicaid enrollees may contact the Managed Care HELPLINE at 1-800-643-2273. FAMIS enrollees may contact the FAMIS CPU at 1-866-873-2647.

Carved-Out Services

Some Medicaid and FAMIS services like dental care, school health services for special education students (which include physical therapy, occupational therapy, speech language pathology, and skilled nursing services), or community rehabilitation mental health services and mental retardation services (which include intensive in-home services, case management services, day treatment, and 24-hour emergency response) will not be covered by the MCOs. These services are carved out, and DMAS will reimburse these services. The DMAS Dental Benefits Administrator will reimburse dental services.

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information

and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the Provider Column to find Medicaid and SLH (State and Local Hospitalization Program) Provider Manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include upcoming changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-provider_newletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.